

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF ALABAMA**

Case Management/Electronic Case Filing (CM/ECF)

**LIMITED PARTICIPANT REGISTRATION FORM**

**LIVE SYSTEM**

This form is used to register for **LIMITED FILING PRIVILEGES** for filing documents via the Internet and CM/ECF. A registered participant will have limited filing privileges to file documents via CM/ECF with the Clerk's Office of the U.S. Bankruptcy Court for the Middle District of Alabama. Limited privileges shall include the authorization to file via the Internet proofs of claim with the Clerk's Office. Additional privileges may be added at the discretion of the Clerk.

The following information is required for CM/ECF registration:

**(Please type)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Agency/Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

email address: \_\_\_\_\_

**By signing and submitting this registration form, I agree to the following:**

1. Signatures on proofs of claim shall be indicated by "s/" and the typed name of the person signing in the following format: "s/" Jane Smith" on the signature line. My password constitutes my signature.
2. The login and password for filing via the Internet shall be used exclusively by me and by any of my employees to whom I give authorization. I will not knowingly permit my login and password to be used by anyone who is not so authorized.
3. I will select and activate a new password in CM/ECF if an employee of mine who has been authorized to use my login and password no longer serves in such a capacity.

4. I will immediately contact the CM/ECF Help Desk at 334-206-6326 to report any suspected compromise of my password.
5. I will receive service of documents and any docket activity electronically pursuant to FRBP 7005, where service of documents is otherwise permitted by first class mail. In doing so, I agree to maintain a current and active email address to receive notification in CM/ECF.
6. Rule 9011 of the Federal Rules of Bankruptcy Procedure and Official Form 10 require that every proof of claim be signed by the person authorized to submit the proof of claim for filing ("**Responsible Person**"). I understand that I must attach a completed form **ALMB-ECF-04** (Declaration re: Electronic Filing of Documents) when submitting the proof of claim. Completing and attaching this form will ensure that the court will have an image of the "**Responsible Person's**" signature. The form may be attached separately or be the last page of the proof of claim.
7. I will attach copies of supporting documents to the proof of claim but if the documentation contains more than 15 pages, then I will attach summaries.  
  
\*\*\*\*Note: The court encourages creditors to file with the proof of claim only those attachments that are necessary to show the basis for the claim and the basis for any secured claim.
8. I will abide by all of the requirements set forth in the "Administrative Procedures for Filing, Signing, Maintaining and Verifying Pleadings and Papers in the Case Management/Electronic Case Filing (CM/ECF) System" in effect ( which includes the current version and any changes or addition that may be made to it).

\_\_\_\_\_  
Applicant Name (please type)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Last four digits of social security number

\_\_\_\_\_  
Signature of Authorized Supervisor of Applicant  
(For security purposes)

\_\_\_\_\_  
Office or Position with Creditor Firm

**9 I would also like to receive a login from the Southern District of Alabama**

**Please fax this form to (334) 954-3819 Attn: Operations Administrator**

**Mailing Address:**

**U.S. Bankruptcy Court  
Attn: Operations Administrator  
P.O. Box 1248  
Montgomery, AL 36102-1248**

#### **COURT USE ONLY**

Received by \_\_\_\_\_

DATE: \_\_\_\_\_

Training Verified \_\_\_\_\_

DATE: \_\_\_\_\_

Entered in System by \_\_\_\_\_

DATE: \_\_\_\_\_